

What is claimed is:

1. A pharmacy benefits management system comprising:
 - a processor server having claim information relating to pharmacy benefits claims processed by a claims processing facility stored therein, said claim information including identification of drugs dispensed to patients, said processor server also having pharmacy benefits formulary information stored therein;
 - a provider server having pharmacy benefits plan structure information stored therein;
 - a management server having price information relating to drugs in various classes stored therein, said management server also having a processing module operative to correlate the claim information with the benefits plan structure information, the price information, and the formulary information to identify expenses associated with selected drugs in accordance with the pharmacy benefits plan structure information, alternative drugs in the same class as the selected drugs, and expenses associated with the alternative drugs; and
 - a communication channel connected between said processor server, said provider server, and said management server and being operative to communicate information between said processor server, said provider server, and said management server.
2. A system as recited in claim 1, wherein the selected drugs are drugs previously dispensed to a patient.
3. A system as recited in claim 1, wherein the alternative drugs are therapeutic alternatives with respect to the selected drugs.
4. A system as recited in claim 1, wherein the benefits plan structure information and the formulary information relate to a multi-tier benefits plan.

5. A system as recited in claim 4, wherein the expenses associated with the selected drugs and the expenses associated with the alternative drugs includes copayment information and total cost information.

6. A pharmacy benefits management system comprising:

a processor server having claim information relating to pharmacy benefits claims processed by a claims processing facility stored therein, said claim information including identification of drugs dispensed to patients, said processor server also having pharmacy benefits formulary information stored therein;

a management server having a processing module operative to extract patient pharmacy benefits information from the claim information and display a list of pharmacy benefits provided to a particular patient, said processing module further being operative to prompt a patient to input a response to verify accuracy of the list of pharmacy benefits and to retain and process the response; and

a communication channel connected between said processor server and said management server and being operative to communicate information between said processor server and said management server.

7. A system as recited in claim 6, wherein the list of pharmacy benefits comprises a list of drugs dispensed to the patient and dates, quantities, and copayments corresponding to the drugs dispensed to the patient.

8. A pharmacy benefits management system comprising

a processor server having claim information relating to pharmacy benefits claims processed by a claims processing facility stored therein, said claim information including identification of drugs dispensed to patients, said processor server also having pharmacy benefits formulary information stored therein;

a provider server having pharmacy benefits plan structure information stored therein;

a management server having price information relating to drugs in various classes stored therein, said management server also having a processing module operative to search the claim information based on a selected filter and display a list of patients whose pharmacy benefits correspond to the selected filter; and

a communication channel connected between said processor server, said provider server, and said management server and being operative to communicate information between said processor server, said provider server, and said management server.

9. A system as recited in claim 8, wherein said processing module is also operative to correlate the claim information with the benefits plan structure information, the price information, and the formulary information to identify expenses associated with drugs dispensed to the list of patients in accordance with the pharmacy benefits plan structure information, alternative drugs in the same class as the drugs dispensed to the list of patients and expenses associated with the alternative drugs.

10. A system as recited in claim 1, wherein the alternative drugs are therapeutic alternatives with respect to the selected drugs.

11. A system as recited in claim 1, wherein the benefits plan structure information and the formulary information relate to a multi-tier benefits plan.

12. A system as recited in claim 1, wherein said processing module is further operative to permit entry of proposed changes to any of the claim information, the

benefit plan structure information, and the formulary information and to display model data based on the proposed changes.

13. A system as recited in claim 12, wherein the proposed changes comprise any of changes to copayment amounts, changes to copayment levels, and changes drugs dispensed.

14. A pharmacy benefits management server comprising

means for downloading information from a processor server having claim information relating to pharmacy benefits claims processed by a claims processing facility, said claim information including identification of drugs dispensed to patients;

means for downloading pharmacy benefits formulary information;

means for downloading pharmacy benefits plan structure information stored therein;

means for downloading price information relating to drugs in various classes stored therein; and

means for correlating the claim information with the benefits plan structure information, the price information, and the formulary information to identify drugs expenses associated with selected drugs in accordance with the pharmacy benefits plan structure information, alternative drugs in the same class as the selected drugs, and expenses associated with the alternative drugs.

15. A server as recited in claim 14, wherein the selected drugs are drugs previously dispensed to a patient.

16. A server as recited in claim 14, wherein the alternative drugs are therapeutic alternatives with respect to the selected drugs.

17. A server as recited in claim 14, wherein the benefits plan structure information and the formulary information relate to a multi-tier benefits plan.

18. A server as recited in claim 17, wherein the expenses associated and the expenses associated with the alternative drugs includes copayment information and total cost information.

19. A pharmacy benefits management server comprising:

means for downloading claim information relating to pharmacy benefits claims processed by a claims processing facility, said claim information including identification of drugs dispensed to patients;

means for downloading pharmacy benefits formulary information;

means for extracting patient pharmacy benefits information from the claim information and displaying a list of pharmacy benefits provided to a particular patient;

means for prompting a patient to input a response to verify accuracy of the list of pharmacy benefits and retaining and processing the response.

20. A server as recited in claim 19, wherein the list of pharmacy benefits comprises a list of drugs dispensed to the patient and dates, quantities, and copayment corresponding to the drugs dispensed to the patient.

21. A pharmacy benefits management server comprising

means for downloading claim information relating to pharmacy benefits claims processed by a claims processing facility, said claim information including identification of drugs dispensed to patients;

means for downloading pharmacy benefits formulary information;

means for downloading pharmacy benefits plan structure information;

means for downloading price information relating to drugs in various classes; and

means for searching the claim information based on predetermined selected filter and displaying a list of patients whose pharmacy benefits correspond to the selected filters.

22. A server as recited in claim 21, further comprising means for correlating the claim information with the benefits plan structure information, the price information, and the formulary information to identify drugs expenses associated with drugs dispensed to the list of patients in accordance with the pharmacy benefits plan structure information, alternative drugs in the same class as the selected drugs, and expenses associated with the alternative drugs.

23. A server as recited in claim 14, wherein the alternative drugs are therapeutic alternatives with respect to the selected drugs.

24. A server as recited in claim 14, wherein the benefits plan structure information and the formulary information relate to a multi-tier benefits plan.

25. A server as recited in claim 14 further comprising means for entering proposed changes to any of the claim information, the benefit plan structure information, and the formulary information and displaying model data based on the proposed changes.

26. A server as recited in claim 25, wherein the proposed changes comprise any of changes to copayment amounts, changes to copayment levels, and changes drugs dispensed.

27. A pharmacy benefits management method comprising the steps of:

downloading claim information relating to pharmacy benefits claims processed by a claims processing facility, said claim information including identification of drugs dispensed to patients;

downloading having pharmacy benefits formulary information;

downloading pharmacy benefits plan structure information;

downloading price information relating to drugs in various classes; and

correlating the claim information with the benefits plan structure information, the price information, and the formulary information to thereby identify drugs expenses associated with selected drugs in accordance with the pharmacy benefits plan structure information, alternative drugs in the same class as the selected drugs, and expenses associated with the alternative drugs.

28. A method as recited in claim 27, wherein the selected drugs in said correlating step are drugs previously dispensed to a patient,

29. A method as recited in claim 27, wherein the alternative drugs in said correlating step are therapeutic alternatives with respect to the selected drugs.

30. A method as recited in claim 27, wherein the benefits plan structure information and the formulary information relate to a multi-tier benefits plan.

31. A method as recited in claim 30, wherein the expenses associated and the expenses associated with the alternative drugs includes copayment information and total cost information.

32. A pharmacy benefits management method comprising the steps of:

downloading claim information relating to pharmacy benefits claims processed by a claims processing facility, said claim information including identification of drugs dispensed to patients;

downloading pharmacy benefits formulary information;

extracting patient pharmacy benefits information from the claim information and displaying a list of pharmacy benefits provided to a particular patient;

prompting a patient to input a response to verify accuracy of the list of pharmacy benefits; and

retaining and processing the response in said prompting step.

33 A method as recited in claim 32 wherein the list of pharmacy benefits comprises a list of drugs dispensed to the patient and dates, quantities, and copayment corresponding to the drugs dispensed to the patient.

34. A pharmacy benefits management method comprising the steps of:

downloading claim information relating to pharmacy benefits claims processed by a claims processing facility, the claim information including identification of drugs dispensed to patients;

downloading pharmacy benefits formulary information;

downloading pharmacy benefits plan structure information;

downloading price information relating to drugs in various classes;

searching the claim information based on a predetermined selected filter;
and

displaying a list of patients whose pharmacy benefits correspond to the
selected filters.

35. A method as recited in claim 34, further comprising the step of correlating the claim information with the benefits plan structure information, the price information, and the formulary information to thereby identify drugs expenses associated with drugs dispensed to the list of patients in accordance with the pharmacy benefits plan structure information, alternative drugs in the same class as the selected drugs, and expenses associated with the alternative drugs.

36. A method as recited in claim 27, wherein the alternative drugs are therapeutic alternatives with respect to the selected drugs.

37. A method as recited in claim 27, wherein the benefits plan structure information and the formulary information relate to a multi-tier benefits plan.

38. A method as recited in claim 27 further comprising the step of permitting entry of proposed changes to any of the claim information, the benefit plan structure information, and the formulary information; and

displaying model data based on the proposed changes.

39. A method as recited in claim 38, wherein the proposed changes comprise any of changes to copayment amounts, changes to copayment levels, and changes drugs dispensed.